

**JULY 2004 MONTHLY REPORT** 

# Health Insurance Risk Sharing Plan (HIRSP) July 2004 Monthly Statistics

	July-04	January-04
BANK SUMMARY		
CHECKWRITE	\$7,048,980.41	\$6,984,735.85
BOOK BALANCE (US Bank & State General Account)	\$44,175,497.00	\$40,798,764.00
ENROLLMENT		
PLAN 1A	8,332	8,082
PLAN 1B	8,398	7,842
PLAN 2	1,757	1,757
TOTAL	18,487	17,681
NEW APPLICATIONS RECEIVED	480	608
CLAIMS		
CLAIMS PROCESSED	101,069	106,648
AVERAGE PROCESSING DAYS	12	16
CLAIM INVENTORY - OVER 30 DAYS OLD	1,198	1,837
CLAIM INVENTORY - TOTAL	8,099	13,832
CLAIMS DENIED (Non-PBM)	11,574	18,250
CLAIMS DENIED (PBM)	8,570	8,470
CLAIM ACCURACY PERFORMANCE	100.00%	99.69%
CUSTOMER SERVICE - HIRSP		
NUMBER OF CALLS RECEIVED	8,944	11,781
PERCENTAGE OF CALLS ANSWERED	95.1%	88.3%
WRITTEN CORRESPONDENCE - RECEIVED	548	762
WRITTEN CORRESPONDENCE - COMPLETED	530	794
WRITTEN CORRESPONDENCE - INVENTORY	48	32
AVERAGE HOLD TIME FOR TELEPHONE CALLS	2.60	5.12

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## Wisconsin Health Insurance Risk-Sharing Plan Breakdown of Incurred Claims and Earned Premium by Quarter and Plan

		1	Q03		
_	Total D	ollars		Per Member	
	Incurred	Earned	Loss	Incurred	Earned
Plan	Claims	Premium	Ratio	Claims	Premium
Plan 1A	\$16,980,428	\$9,643,975	176.1%	\$683.76	\$388.34
Plan 1B	6,901,173	6,382,184	108.1%	360.88	333.74
Plan 2	3,535,102	1,759,919	200.9%	683.51	340.28
Total	\$27,416,703	\$17,786,078	154.1%	\$558.06	\$362.03
		2	Q03		
_	Total D	ollars		Per Member	
	Incurred	Earned	Loss	Incurred	Earned
Plan	Claims	Premium	Ratio	Claims	Premium
Plan 1A	\$20,064,644	\$9,858,100	203.5%	\$787.59	\$386.96
Plan 1B	6,971,571	6,664,640	104.6%	348.16	332.83
Plan 2	4,031,084	1,796,687	224.4%	767.68	342.16
Total	\$31,067,299	\$18,319,427	169.6%	\$612.15	\$360.97
		3	Q03		
_	Total D			Per Member	Per Month
	Incurred	Earned	Loss	Incurred	Earned
Plan	Claims	Premium	Ratio	Claims	Premium
Plan 1A	\$21,679,032	\$10,846,522	199.9%	\$850.69	\$425.62
Plan 1B	7,815,938	7,649,161	102.2%	374.40	366.41
Plan 2	4,264,333	2,062,401	206.8%	819.75	396.46
Total	\$33,759,303	\$20,558,083	164.2%	\$654.73	\$398.71
		***********************************	Q03		
_	Total D			Per Member	Per Month
	Incurred	Earned	Loss	Incurred	Earned
Plan	Claims	Premium	Ratio	Claims	Premium
Plan 1A	\$23,885,622	\$10,825,220	220.6%	\$938.61	\$425.39
Plan 1B	10,110,688	8,013,666	126.2%	460.23	364.77
Plan 2	4,527,316	2,062,818	219.5%	869.63	396.24
Total	\$38,523,627	\$20,901,704	184.3%	\$732.07	\$397.20
			Q04		
_	Total D	ollars		Per Member	Per Month
	Incurred	Earned	Loss	Incurred	Earned
Plan	Claims	Premium	Ratio	Claims	Premium
Plan 1A	\$20,744,177	\$10,273,986	201.9%	\$845.36	\$418.68
Plan 1B	10,114,877	8,769,984	115.3%	420.45	364.55
Plan 2	4,225,154	2,060,924	205.0%	809.26	394.74
Total	\$35,084,209	\$21,104,894	166.2%	\$651.92	\$392.16

NOTES: Loss Ratio = Incurred Claims / Earned Premiums

Earned Premium includes Premium Subsidies

Incurred Claims include Provider Contributions

Administrative Expenses are not included in this exhibit

Incurred Claims and Earned Premiums are updated quarterly and restated to reflect

the most current information available as of June  $30,\,2004$ 

### Wisconsin Health Insurance Risk Sharing Plan Financial Report Notes For the Period Ending July 31, 2004

These monthly reports do not include the June 30, 2002 CAFR<sup>1</sup> (Combined Annual Financial Report) adjustments. When these adjustments are available, the monthly report will reflect these changes. Previously issued monthly reports will not be reissued but the financial statement notes for the current month will summarize the CAFR adjustment.

### 1) Policyholder Retained Earnings, End of Period (page 3 & 9)

The policyholder retained earnings include both assigned and the unassigned surplus (see Interim Reconciliation page 6 and 12 for the breakdown).

### 2) Other Recievables (page 7 & 13)

Claims expense and receivables are adjusted monthly to account for doubtful receivables per GASB 38.

### 3) Losses Paid or Approved for Payment (page 3 & 9)

Claims expense and receivables are adjusted monthly to account for doubtful receivables per GASB 38.

<sup>&</sup>lt;sup>1</sup> CAFR is the State of Wisconsin annual financial report published by DOA (Dept of Admin) and prepared in accordance with GASB (Governmental Accounting Standards Board).

#### Wisconsin Health Insurance Risk Sharing Plan for the Period Ended July 31, 2004 Fiscal Year 2005

	[		Unaudited Sta	atement of Re	evenues, Exp	enses, and Ch	nanges in Reta	ined Earnings	S				
Operating Revenues	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Year to Date
Gross Premiums	7,872,385	-	-	-	-	-	-	-	-	-	-	-	7,872,385
Premium Subsidized	(332,487)	-	-	-	-	-	-	-	-	-	-	-	(332,487
Net Premium Revenues	7,539,898	-	-	-	-	-	-	-	-	-	-	-	7,539,898
Provider Contribution	4,513,059	_	_	_	_	_	_	_	_	_	_	_	4,513,059
Insurer Assessments	2,691,362	-	-	-	-	-	-	-	-	-	-	-	2,691,362
Total Operating Revenues	14,744,319		-	-	-	-	-	-	-	-	-		14,744,319
· ·													
Operating Expenses													
Medical Losses:													
Losses Paid or Approved for Payment (3)	10,959,459	-	-	-	-	-	-	-	-	-	-	-	10,959,45
Increase (Decrease) in Unpaid Losses	1,307,286	-	-	-	-	-	-	-	-	-	-	-	1,307,28
Deductible Subsidy Paid	56,140	-	-	-	-	-	-	-	-	-	-	-	56,14
Total Medical Losses	12,322,885	-	-	-	-	-	-	-	-	-	-	-	12,322,88
harmacy Losses:													
Losses Paid or Approved for Payment	3,455,297	-	_	-	-	-	_	_	_	_	_	_	3,455,29
Increase (Decrease) in Unpaid Losses	553,645	-	_	-	_	-	_	_	_	_	_	_	553,64
Drug Rebates	(91,621)	-	-	-	-	-	-	-	-	-	-	_	(91,62
Subsidy - Coinsurance Out-of-Pocket Max	19,025	-	-	-	-	-	-	-	-	-	-	-	19,02
Total Pharmacy Losses	3,936,346	-	-	-	-	-	-	-	-	-	-	-	3,936,34
•													
Total Losses	16,259,231	-	-	-	-	-	-	-	-	-	-	-	16,259,23
oss adjustment expenses	-	-	-	-	-	-	-	-	-	-	-	-	-
dministrative expenses													
DHFS Admin Fees	38,870	-	-	-	-	-	-	-	-	-	-	-	38,87
EDS Admin Fees	72,709	-	-	-	-	-	-	-	-	-	-	-	72,70
UGS Admin Fees	245,436	-	-	-	-	-	-	-	-	-	-	-	245,43
Milliman USA Actuarial Services	10,500	-	-	-	-	-	-	-	-	-	-	-	10,50
Other Admin Fees	12,075	-	-	-	-	-	-	-	-	-	-	-	12,07
Total Administrative Expenses	379,590	-	-	-	-	-	-	-	-	-	-	-	379,59
Referral fees	8,785	-	-	-	-	-	-	-	-	-	-	-	8,78
otal Operating Expenses	16,647,606	-	-	-	-	-	-	-	-	-	-	-	16,647,60
Net Operating Income (Loss)	(1,903,287)	-		-		-	-	-	-	-	-	-	(1,903,28
Non-Operating Revenues (Expenses)													
nvestment income	40,452	-	-	-	-	-	-	-	-	-	-	-	40,45
otal Non-operating Revenues (Expenses)	40,452	-	-	-	-	-	-	-	-	-	-	-	40,45
let Income (Loss)	(1,862,835)	-						-	-	-		-	(1,862,83
Additions to Retained Earnings Policyholder													
Retained Earnings, Beginning of Period	5,379,754	_	_	_	_	_	_	-	_	_	_	-	5,379,75
Unfunded Policyholder Subsidies	-	-	_	-	-	-	_	_	_	_	_	_	
Current Earnings	(1,971,643)	-	-	-	-	-	-	-	-	-	-	_	(1,971,64
Retained Earnings, End of Period <sup>(1)</sup>	3,408,111	-	-	-	-	-	-	-	-	-	-	-	3,408,11
roviders													
Retained Earnings, Beginning of Period	7,184,952	_	_	_	_	_	_	-	_	_	_	_	7,184,95
Premium Subsidy Underpayment Adj.		-	-	-	-	-	-	-	-	-		-	, ,
Current Earnings	1,002,835	-	-	-	-	-	-	-	-	-	-	-	1,002,83
Retained Earnings, End of Period	8,187,787	-	-	-	-	-	-	-	-	-	-	-	8,187,78
surers													
Retained Earnings, Beginning of Period	4,883,888	_	_	_	_	_	_	-	_	_	_	_	4,883,88
Premium Subsidy Underpayment Adj.	-,0,000	-	-	-	-	-	-	-	-	-		-	.,000,00
Current Earnings	(818,862)	-	-	-	-	-	-	-	-	-	-	-	(818,86
Retained Earnings, End of Period	4,065,026	-	-	-	-	-	-	-	-	-	-	-	4,065,0
nfunded Deductible and Coinsurance Sub	sidy												
Retained Earnings, Beginning of Period	(223,692)	-	-	-	-	-	-	-	-	-	-	-	1,928,18
Current Earnings	(75,165)	-											(75,16
Retained Earnings, End of Period	(298,857)	-	-	-	-	-	-	-	-	-	-	-	1,853,02
otal Retained Earnings	15,362,067	-	-	-	-	-	-	-	-	-	-	-	17,513,94

### WISCONSIN HEALTH INSURANCE RISK SHARING PLAN 2005 FISCAL YEAR DETAIL OF MISC REVENUE & ADMIN EXPENSE AS OF JULY 31, 2004

MISC REVENUE	JUL 04	AUG	SEP	ост	NOV	DEC	JAN 05	FEB	MAR	APR	MAY	JUN	YEAR TO DATE TOTAL
													-
													-
													-
TOTAL MISC REVENUE	-	-	-	-	-	-	-	-	-	-	-	-	

													YEAR TO DATE
MISC ADMIN EXP	JUL 04	AUG	SEP	OCT	NOV	DEC	JAN 05	FEB	MAR	APR	MAY	JUN	TOTAL
Bank Service Charge													-
Postage	9,875.07												9,875.07
LAB Audit Fee	1,700.00												1,700.00
Speed Scribe													-
UW Extension													-
NASCHIP	500.00												500.00
Legal Services													-
Assembly Chief Clerk													-
Newspaper Ad													-
Permedion (Independent Review Org.)													-
													-
													-
													-
													-
													-
TOTAL MISC ADMIN EXP	12,075.07	-	-	-	-	-	-	-	-	-	-	-	12,075.07

Prepared 8/19/2004

#### Wisconsin Health Insurance Risk Sharing Plan Fiscal Year 2005 Interim Reconciliation As Of July 31, 2004

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Year to Date
1. Operating and Administrative Costs under s.149.143(1)			•										
Medical Losses Paid or Approved for Payment	10,959,459	-	-	-	-	-	-	-	-	-	-	-	10,959,459
Increase (Decrease) in Unpaid Medical Losses	1,307,286	-	-	-	-	-	-	-	-	-	-	-	1,307,286
Pharmacy Losses Paid or Approved for Payment	3,455,297	-	-	-	-	-	-	-	-	-	-	-	3,455,297
Increase (Decrease) in Unpaid Pharmacy Losses	553,645	-	-	-	-	-	-	-	-	-	-	-	553,645
Drug Rebates	(91,621)	-	-	-	-	-	-	-	-	-	-	-	(91,621)
Total Administrative Expenses	388,375	-	-	-	-	-	-	-	-	-	-	-	388,375
Loss Adjustment Expense		-	-	-	-	-	-	-	-	-	-	-	
Total Operating Expense	16,572,441	-	-	-	-	-	-	-	-	-	-	-	16,572,441
2. Adjustments to Operating and Administrative Costs													
Total Non-operating Revenue (Expense)	40,452	-	-	-	-	-	-	-	-	-	-	-	40,452
3. Total Fiscal Year Program Costs to be Split 60% 20% 20%	16,531,989	-	-	-	-	-	-	-	-	-	-	-	16,531,989
4. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Exc	ludina Subsidy	Costs)											
Funding Shares		,											
60% Policyholders	9,919,193	-	-	-	-	-	-	-	-	-	-	-	9,919,193
20% Providers	3,306,398	-	-	-	-	-	-	-	-	-	-	-	3,306,398
20% Insurers	3,306,398	-	-	-	-	-	-	-	-	-	-	-	3,306,398
5. Subsidy Funding Shares													
Premium subsidies	332.487	_	_	_	_	_	_	_	_	_	_	_	332.487
Deductible Subsidies	56,140	-	_	_	_	_	_	_	_	_	_	_	56,140
Subsidy - coinsurance out-of-pocket Max	19,025	-	-	-	-	-	-	-	-	-	-	-	19,025
Total Subsidies	407,652	-	-	-	-	-	-	-	-	-	-	-	407,652 *
Subsidy Funding Needed by Source in addition to Section 3 Fund	ding Shares												
Providers	203,826	-	-	-	-	-	-	-	-	-	-	-	203,826
Insurers	203,826	-	-	-	-	-	-	-	-	-	-	-	203,826
		•											
6. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Incl		COSTS)											0.040.400
Policyholders Providers	9,919,193 3,510,224	-	-	-	-	-	-	-	-	-	-	-	9,919,193 3,510,224
Insurers	3,510,224	-	-	-	-	-	-	-	-	-	-	-	3,510,224
		-											0,010,224
<ol> <li>Non-GPR Revenues by Source Including GPR Subsidies Unde Policyholders</li> </ol>		1)											
Premium	7,539,898	-	-	-	-	-	-	-	-	-	-	-	7,539,898
Premium and Deductible Subsidies Credited to Policyholders		-	-	-	-	-	-	-	-	-	-	-	407,652
Subtotal	7,947,550	-	-	-	-	-	-	-	-	-	-	-	7,947,550
Providers	4,513,059	_	_	_	_	_	_	_	_	-	-	_	4,513,059
Insurers	2,691,362	-	-	-	-	-	-	-	-	-	-	-	2,691,362
Total	15,151,971	-	-	-	-	-	-	-	-	-	-	-	15,151,971
	-, - ,												-, - ,

<sup>\*</sup> Totals updated 10/20/2004.

#### Wisconsin Health Insurance Risk Sharing Plan Fiscal Year 2005 Interim Reconciliation As Of July 31, 2004

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Year to Date
8. Interim Estimate of Surplus/(Deficit) Account Balance for FY	2005												
Policyholders													
Prior Period Surplus / (Deficit)	5,379,754	-	-	-	-	-	-	-	-	-	-	-	5,379,754
Premium (Including Premium and Deductible Subsidies)	7,947,550	_	_	_	_	_	_	_	_	_	_	_	7,947,550
Less Cost	9,919,193	-	_	_	_	_	_	_	_	_	_	_	9,919,193
Less Unfunded Policyholder Subsidies		-	-	_	-	-	-	-	-	-	-	-	-
Monthly Change	(1,971,643)	-	-	-	-	-	-	-	-	-	-	-	(1,971,643)
Ending Surplus / (Deficit)	3,408,111	-	-	-	-	-	-	-	-	-	-	-	3,408,111
Assigned Surplus to SFY 2005												_	
Unassigned Surplus	3,408,111		-	-	-	-	-	-	-	-	-		3,408,111
Gradosiginos darpisto	0,100,111												0,100,111
Providers													
Prior Period Surplus / (Deficit)	7,184,952	-	-	-	-	-	-	-	-	-	-	-	7,184,952
Contribution	4,513,059												4,513,059
Less Cost	3,510,224		-	-	-	-	-		-		-		3,510,224
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	_	-
Monthly Change	1,002,835	-	-	-	-	-	-	-	-	-	-	-	1,002,835
Ending Surplus / (Deficit)	8,187,787	-	-	-	-	-	-	-	-	-	-	_	8,187,787
Insurers Prior Period Surplus / (Deficit)	4,883,888												4,883,888
Prior Period Surpius / (Dericit)	4,003,000	-	-	-	-	-	-	-	-	-	-	-	4,003,000
Assessment	2,691,362	-	-	-	-	-	-	-	-	-	-	_	2,691,362
Less Cost	3,510,224	-	-	-	-	-	-	-	-	-	-	-	3,510,224
Premium Subsidy Underpayment Adj.		-	-	-	-	-	-	-	-	-	-	-	
Monthly Change	(818,862)	-	-	-	-	-	-	-	-	-	-	-	(818,862)
Ending Surplus / (Deficit)	4,065,026	-	-	-	-	-	-	-	-	-	-	_	4,065,026
Unfunded Deductible and Coinsurance Subsidy	(222 602)												(222 602) *
Prior Period Surplus / (Deficit) Monthly Change	(223,692) (75,165)	-	-	-		-	-	-	-	-	-	-	(223,692) * (75,165)
Ending Surplus / (Deficit)	(298,857)												(298,857) *
Entang Calpiac / (Const.)	(200,001)												(200,001)
													.=
Total HIRSP Retained Earnings	15,362,067	-	-	-	-	-	-	-	-	-	-	-	17,513,946

<sup>\*</sup> Totals updated 10/20/2004.

### Wisconsin Health Insurance Risk Sharing Plan July 31, 2004 Fiscal Year 2005

### **Unaudited Balance Sheet**

Assets	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
Cash and Cash Equivalents	44,175,497	-	-	-	-	-	-	-	-	-	-	-
Other Receivables (2)	39,541	-	-	-	-	-	-	-	-	-	-	-
Drug Rebates Receivable	694,465	-	-	-	-	-	-	-	-	-	-	-
Assessments Receivable	2,781,901	-	-	-	-	-	-	-	-	-	-	-
Prepaid Items	57,739	-	-	-	-	-	-	-	-	-	-	-
Total Assets	47,749,143	-	-	-	-	-	-	-	-	-	-	-
Lightlities and Fund Faulty												
Liabilities and Fund Equity Liabilities:												
Unpaid Medical loss Liabilities	16,129,059											
Unpaid Prescription Drug Loss Liabilities	2,198,353	-	-	-	-	-	-	-	-	-	-	-
Unpaid Loss Adjustment Expense	660,000	-	-	-	-	-	-	-	-	-	-	-
Unearned Premiums	12,626,044	-	-	-	-	-	-	-	-	-	-	-
Unearned Assessments	12,020,044	-	-	-	-	-	-	-	-	-	-	-
Accounts Payable and Other Accrued Liabilities	773,620	-	-	-	-	-	-	-	-	-	-	-
Total Liabilities	32,387,076											
Total Liabilities	32,307,076	-	-	-	-	-	-	-	-	-	-	-
Fund Equity:												
Policyholder	3,408,111	-	-	-	-	-	-	-	-	-	-	-
Providers	8,187,787	_	-	_	_	_	_	_	_	-	_	-
Insurers	4,065,026	-	-	-	-	-	-	-	-	-	-	-
Unfunded Deductible and Coinsurance Subsidy	(298,857)	-	-	-	-	-	_	_	_	-	-	-
Total Retained Earnings	15,362,067	-	-	-	-	-	-	-	-	-	-	-
-												
Total Liabilities and Fund Equity	47,749,143	-	-		-	-		-	-		-	

### WISCONSIN HEALTH INSURANCE RISK SHARING PLAN MONTHLY PROVIDER CONTRIBUTION REPORT AS OF JULY 31, 2004

PROVIDER SHARE CALCULATION FOR THE CURRENT MONTH - CLAIMS BY CLAIM TYPE								
REGULAR CLAIMS			USUAL	LESS HIRSP				
	BILLED	U & C	AND	ALLOWED	PROVIDER			
CLAIM TYPE / CATEGORY	CHARGES	PERCENTAGE	CUSTOMARY	CHARGES	SHARE			
CT 20 & 39/20 PROFESSIONAL	6,055,262.06	26.8%	4,432,451.85	2,603,912.84	1,828,539.01			
CT 23 & 39/23 HOSPITAL OUTPATIENT	3,733,018.36	17.1%	3,094,672.22	2,195,271.72	899,400.50			
CT 24 & 39/24 OTHER	473,144.59	13.0%	411,588.48	334,267.50	77,320.98			
CT 40 & 49/40 HOSPITAL INPATIENT	5,176,110.70	17.8%	4,252,692.55	3,013,379.80	1,239,312.75			
CT 41 & 59/41 OTHER	-	13.0%	-	-	-			
TOTAL	\$ 15,437,535.71	·	\$ 12,191,405.10	\$ 8,146,831.86	\$ 4,044,573.24			

CROSSOVER CLAIMS	MEDICARE			HIRSP	
	ALLOWED	MEDICARE	HIRSP	DEDUCTIBLE/	PROVIDER
CLAIM TYPE / CATEGORY	CHARGES	PAID	PAID	COINSURANCE	SHARE
CT 30 & 39/30 PROFESSIONAL	629,887.94	491,798.83	112,857.37	25,928.23	(696.49)
CT 31 & 39/31 HOSPITAL OUTPATIENT	423,527.25	305,236.37	101,076.97	20,524.62	(3,310.71)
CT 50 & 49/50 HOSPITAL INPATIENT	2,295,492.45	2,229,410.80	60,403.64	5,678.01	-
CT 51 & 59/51 OTHER	47,050.47	36,697.47	10,353.00	ı	-
TOTAL CROSSOVER	\$ 3,395,958.11	\$ 3,063,143.47	\$ 284,690.98	\$ 52,130.86	\$ (4,007.20)

PROVIDER CONTRIBUTION ON THE INCREASE (DECREASE) IN UNPAID LOSSES	\$ 472,493.00

TOTAL PROVIDER CONTRIBUTION NON-PHARMACY	\$ 4,513,059.04

PHARMACY CLAIMS			USUAL	LESS HIRSP	
	BILLED	U & C	AND	ALLOWED	PROVIDER
CLAIM TYPE / CATEGORY	CHARGES	PERCENTAGE	CUSTOMARY	CHARGES	SHARE
CT 10 & 19/10 PRESCRIPTION DRUG					
CLAIMS NOT PROCESSED THROUGH PBM	-	0.00%	-	-	
CT 10 & 19/10 PRESCRIPTION DRUG					
CLAIMS PROCESSED THROUGH PBM	5,968,295.28	0.00%	3,836,269.59	3,836,269.59	-
TOTAL PROVIDER CONTRIBUTION PHARMACY	5,968,295.28		3,836,269.59	3,836,269.59	-

#### Wisconsin Health Insurance Risk Sharing Plan for the Period Ended July 31, 2004 Calendar Year 2004

			Unaudited Sta	atement of Re	evenues, Exp	enses, and Cl	nanges in Retair	ned Earnings	3				
Operating Revenues	Jan	Feb	Mar	Apr	Мау	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
Gross Premiums	7,117,706	7,171,995	7,179,941	7,235,705	7,293,859	7,319,775	7,872,385	-	-	-	-	-	51,191,366
Premium Subsidized Net Premium Revenues	(375,583) 6,742,123	(340,708) 6,831,287	(281,596) 6,898,345	(318,817) 6,916,888	(337,508) 6,956,351	(339,541) 6,980,234	(332,487) 7,539,898	- :	-	-	-	-	(2,326,240) 48,865,126
Net i remain Nevendes	0,142,120	0,001,201	0,000,040	0,010,000	0,000,001	0,000,204	7,000,000						40,000,120
Provider Contribution	2,436,326 3,230,941	3,990,827 3,230,941	3,672,999	3,897,484 3,204,202	5,552,906	3,786,128 3,230,941	4,513,059 2,691,362	-	-	-	-	-	27,849,729 22,050,269
Insurer Assessments Total Operating Revenues	12,409,390	14,053,055	3,230,941 13,802,285	14,018,574	3,230,941 <b>15,740,198</b>	13,997,303	14,744,319	<del></del>				<del>.</del>	98,765,124
	,,	,,	,,	. ,, ,	,,	,,	,,						,,
Operating Expenses													
Medical Losses:	44 000 074	0.007.057	0.047.447	44.070.444	0.000.055	0.450.004	10.050.150						74 400 404
Losses Paid or Approved for Payment (3) Increase (Decrease) in Unpaid Losses	11,093,371 (4,812,800)	9,267,957 (218,179)	9,217,447 (442,478)	11,270,114 (1,371,744)	9,920,955 4,558,309	9,456,801 (161,117)	10,959,459 1,307,286	-	-	-	-	-	71,186,104 (1,140,723)
Deductible Subsidy Paid	64,365	69,422	70,732	74,434	55,222	56,102	56,140	-	-	-	-	-	446,417
Total Medical Losses	6,344,936	9,119,200	8,845,701	9,972,804	14,534,486	9,351,786	12,322,885	-	-	-	-	-	70,491,798
Pharmacy Losses:													
Losses Paid or Approved for Payment	2,978,135	2,993,129	4,758,886	3,266,281	3,331,269	3,458,237	3,455,297	-	-	-	-	-	24,241,234
Increase (Decrease) in Unpaid Losses	8,871	236,239 (76,180)	(1,179,715)	318,825	467,800 (85,621)	88,955 (135,766)	553,645 (91,621)	-	-	-	-	-	494,620 (729,916)
Drug Rebates Subsidy - Coinsurance Out-of-Pocket Max	(75,286) 9,524	(76,160)	(181,299) 1,197	(84,143) 8,127	12,781	17,026	19,025	-	-	-	-		67,757
Total Pharmacy Losses	2,921,244	3,153,265	3,399,069	3,509,090	3,726,229	3,428,452	3,936,346	-	-	-	-	-	24,073,695
Total Losses	9,266,180	12,272,465	12,244,770	13,481,894	18,260,715	12,780,238	16,259,231	_	_	_	_	_	94,565,493
	.,,	, , ,	, , ,	., . ,	.,,	, ,	.,, .						,,,,,,
Loss adjustment expenses	-	-	-	-	-	-	-	-	-	-	-	-	-
Administrative expenses DHFS Admin Fees	20 274	44 540	39,798	33,550	27 402	E7 22E	20.070						270 772
EDS Admin Fees	28,374 72,329	44,542 115,178	95,128	72,754	37,403 74,318	57,235 86,289	38,870 72,709	-	-	-	-		279,772 588,705
UGS Admin Fees	249,725	253,755	237,538	238,420	244,275	255,187	245,436	-	-	-	-		1,724,336
Milliman USA Actuarial Services	5,696	6,700	17,520	8,779	41,204	17,163	10,500	-	-	-	-	-	107,562
Other Admin Fees	13,703	23,437	34,063	16,646	24,474	14,804	12,075	-	-	-		-	139,202
Total Administrative Expenses	369,827	443,612	424,047	370,149	421,674	430,678	379,590	-	-	-	-	-	2,839,577
Referral fees	6,265	7,490	7,315	7,315	8,435	8,785	8,785	-	-	-	-	-	54,390
Total Operating Expenses	9,642,272	12,723,567	12,676,132	13,859,358	18,690,824	13,219,701	16,647,606	-	-	-	-	-	97,459,460
Net Operating Income (Loss)	2,767,118	1,329,488	1,126,153	159,216	(2,950,626)	777,602	(1,903,287)	-	-	-	-	-	1,305,664
Non-Operating Revenues (Expenses)	00.774	00.040	00.755	00.400	55 500	05.544	40.450						070 000
Investment income Total Non-operating Revenues (Expenses)	36,771 36,771	28,849 28,849	36,755 36,755	36,138 36,138	55,560 55,560	35,514 35,514	40,452 40,452					<del></del>	270,039 270,039
Net Income (Loss)	2,803,889	1,358,337	1,162,908	195,354	(2,895,066)	813,116	(1,862,835)	•	-		-	<u> </u>	1,575,703
Additions to Retained Earnings													
Policyholder													
Retained Earnings, Beginning of Period	11,859,597	13,332,224	12,998,587	12,709,989	9,631,981	5,853,486	5,379,754	-	-	-	-	-	11,859,597
Unfunded Policyholder Subsidies	- 1,472,627	(333,637)	(288,598)	(2,151,879)		- (473,732)	(1,971,643)	-	-	-	-	-	(2,151,879) (6,299,607)
Current Earnings Retained Earnings, End of Period <sup>(1)</sup>	13,332,224	12,998,587	12,709,989	(926,129) 9,631,981	5,853,486	5,379,754	3,408,111		-		-		3,408,111
Bernidan													
Providers  Retained Earnings, Beginning of Period	1,093,317	1,398,585	2,659,264	3,642,010	4,590,673	6,227,371	7,184,952	_	_	_	_	_	1,093,317
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	305,268	1,260,679	982,746	948,663	1,636,698	957,581	1,002,835	-	-	-	-	-	7,094,470 <b>8,187,787</b>
Retained Earnings, End of Period	1,398,585	2,659,264	3,642,010	4,590,673	6,227,371	7,184,952	8,187,787	•	-	-	-	•	0,107,707
Insurers  Retained Farnings Reginning of Period	2 770 012	3 860 905	4 370 600	A 011 270	5 166 750	A A91 A02	V 883 000						2,770,012
Retained Earnings, Beginning of Period Premium Subsidy Underpayment Adj.	2,770,012	3,869,895	4,370,689	4,911,378 -	5,166,759 -	4,481,493 -	4,883,888		-	-	-	-	2,110,012
Current Earnings	1,099,883	500,794	540,689	255,381	(685,266)	402,395	(818,862)	-	-	-	-	-	1,295,014 4.065.026
Retained Earnings, End of Period	3,869,895	4,370,689	4,911,378	5,166,759	4,481,493	4,883,888	4,065,026	-	-	-	-	-	4,065,026
Unfunded Deductible and Coinsurance Sub Retained Earnings, Beginning of Period	sidy (1,936,562)	(2.010.454)	(2,079,950)		(92 EG4)	(150 564)	(223,692)						215,317
Current Earnings	(73,889)	(2,010,451) (69,499)	(2,079,950)	(82,561)	(82,561) (68,003)	(150,564) (73,128)	(223,692) (75,165)		-	-	-	-	(514,174)
Retained Earnings, End of Period	(2,010,451)			(82,561)		(223,692)	(298,857)	-	-	-	-	-	(298,857)
Total Retained Earnings	16.590.253	17,948,590	19.111.498	19.306.852	16.411.786	17.224.902	15,362,067	_	_				15,362,067
	.0,000,200	,5 70,000	.0,,+00	. 0,000,002	.0,,.00	,,,,,,	. 0,002,001						.0,002,007

### WISCONSIN HEALTH INSURANCE RISK SHARING PLAN 2004 CALENDAR YEAR DETAIL OF MISC REVENUE & ADMIN EXPENSE AS OF JULY 31, 2004

MISC REVENUE	JAN 04	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	ост	NOV	DEC	YEAR TO DATE TOTAL
													-
													-
													-
													-
													-
													-
													-
TOTAL MISC REVENUE	-	-	-	-	-	-	-	-	-	-	-	-	-

													YEAR TO DATE
MISC ADMIN EXP	JAN 04	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	ОСТ	NOV	DEC	TOTAL
Bank Service Charge				897.27									897.27
Postage	12,253.37	20,517.45	18,668.96	12,828.24	21,474.38	17,964.37	9,875.07						113,581.84
LAB Audit Fee	1,450.00	2,920.00	2,920.00	2,920.00	3,000.00	(3,160.00)	1,700.00						11,750.00
Speed Scribe													-
UW Extension													-
NASCHIP							500.00						500.00
Legal Services			12,473.72										12,473.72
Meridian Resource Corp													-
Assembly Chief Clerk													-
Newspaper Ad													-
Permedion (Independent Review Org.)													-
													-
													-
						•	•	•					-
						•	•	•					-
TOTAL MISC ADMIN EXP	13,703.37	23,437.45	34,062.68	16,645.51	24,474.38	14,804.37	12,075.07	-	-	-	-	-	139,202.83

#### Wisconsin Health Insurance Risk Sharing Plan Calendar Year 2004 Interim Reconciliation As Of July 31, 2004

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
1. Operating and Administrative Costs under s.149.143(1)	44 000 074	0.007.057	0.047.447	44.070.444	0.000.055	0.450.004	40.050.450						74 400 404
Medical Losses Paid or Approved for Payment Increase (Decrease) in Unpaid Medical Losses	11,093,371 (4,812,800)	9,267,957 (218,179)	9,217,447 (442,478)	11,270,114 (1,371,744)	9,920,955 4,558,309	9,456,801 (161,117)	10,959,459 1,307,286	-	-	-	-	-	71,186,104 (1,140,723)
Pharmacy Losses Paid or Approved for Payment	2,978,135	2,993,129	4,758,886	3,266,281	3,331,269	3,458,237	3,455,297				-		24,241,234
Increase (Decrease) in Unpaid Pharmacy Losses	8,871	236,239	(1,179,715)	318,825	467,800	88,955	553,645	-	-	-	-	-	494,620
Drug Rebates	(75,286)	(76,180)	(181,299)	(84,143)	(85,621)	(135,766)	(91,621)	-	-	-	-	-	(729,916)
Total Administrative Expenses	376,092	451,102	431,362	377,464	430,109	439,463	388,375	-	-	-	-	-	2,893,967
Loss Adjustment Expense	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Operating Expense	9,568,383	12,654,068	12,604,203	13,776,797	18,622,821	13,146,573	16,572,441	-	-	-	-	-	96,945,286
2. Adjustments to Operating and Administrative Costs													
Total Non-operating Revenue (Expense)	36,771	28,849	36,755	36,138	55,560	35,514	40,452	-	-	-	-	-	270,039
3. Total Calendar Year Program Costs to be Split 60% 20% 20%	9,531,612	12,625,219	12,567,448	13,740,659	18,567,261	13,111,059	16,531,989	-	-	-	-	-	96,675,247
4. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Excl	uding Subsid	y Costs)											
Funding Shares 60% Policyholders	5.718.968	7,575,131	7.540.468	8.244.395	11.140.357	7.866.635	9.919.193						58.005.147
20% Providers	1,906,322	2,525,044	2,513,490	2,748,132	3,713,452	2,622,212	3,306,398		-	-	-		19,335,050
20% Insurers	1,906,322	2,525,044	2,513,490	2,748,132	3,713,452	2,622,212	3,306,398	-	-	-	-	-	19,335,050
5. Subsidy Funding Shares													
Premium subsidies	375,583	340,708	281,596	318,817	337,508	339,541	332,487	-	-	-	-	-	2,326,240
Deductible Subsidies	64,365	69,422	70,732	74,434	55,222	56,102	56,140	-	-	-	-	-	446,417
Subsidy - coinsurance out-of-pocket Max Total Subsidies	9,524 449,472	410,207	1,197 353,525	8,127 401,378	12,781 405,511	17,026 412,669	19,025 407,652	-	-	-	-	-	67,757 2,772,657
Total Subsidies	449,472	410,207	333,323	401,376	405,511	412,009	407,052	-	-	-	-	-	2,772,037
Subsidy Funding Needed by Source in addition to Section 3 Fundi		005.404	170 700	000 000	000 750	000.005	000 000						4 400 000
Providers Insurers	224,736 224,736	205,104 205,103	176,763 176,762	200,689 200,689	202,756 202,755	206,335 206,334	203,826 203,826	-	-	-	-	-	1,420,209 1,420,205
IIISUICIS	224,730	203,103	170,702	200,009	202,733	200,334	203,020	-	-	-	-	-	1,420,203
6. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Inclu		,	7.540.400	0.044.005	44 440 057	7 000 005	0.040.400						50 005 447
Policyholders Providers	5,718,968 2.131.058	7,575,131 2.730.148	7,540,468 2.690.253	8,244,395 2.948.821	11,140,357 3.916.208	7,866,635 2,828,547	9,919,193 3,510,224	-			-		58,005,147 20,755,259
Insurers	2,131,058	2,730,147	2,690,252	2,948,821	3,916,207	2,828,546	3,510,224	-	-	-	-	-	20,755,255
7. Non-GPR Revenues by Source Including GPR Subsidies Under	s.20.435(4)(a	h)											
Policyholders Premium	6,742,123	6,831,287	6,898,345	6,916,888	6,956,351	6,980,234	7,539,898	_	_	_		_	48,865,126
Premium and Deductible Subsidies Credited to Policyholders	449,472	410,207	353,525	401.378	405.511	412.669	407.652		-	-	-		2,840,414
Subtotal	7,191,595	7,241,494	7,251,870	7,318,266	7,361,862	7,392,903	7,947,550	-	-	-	-	-	51,705,540
Providers	2,436,326	3,990,827	3,672,999	3,897,484	5,552,906	3,786,128	4,513,059	-	-	-	-	-	27,849,729
Insurers Total	3,230,941 12.858.862	3,230,941 14.463.262	3,230,941 14,155,810	3,204,202 14,419,952	3,230,941 16,145,709	3,230,941 14,409,972	2,691,362 15,151,971	<u> </u>			<u> </u>		22,050,269 #########
i Otal	12,000,002	17,403,202	17, 133,010	17,413,332	10,140,709	17,400,872	10,101,011	-	-	-	-	-	************

#### Wisconsin Health Insurance Risk Sharing Plan Calendar Year 2004 Interim Reconciliation As Of July 31, 2004

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
8. Interim Estimate of Surplus/(Deficit) Account Balance for CY 2	004												
Policyholders Prior Period Surplus / (Deficit)	11.859.597	13.332.224	12.998.587	12.709.989	9.631.981	5.853.486	5.379.754						11.859.597
Filor Feriod Surplus / (Delicit)	11,659,597	13,332,224	12,990,007	12,709,969	9,031,961	3,033,400	5,579,754	-	-	-	-	-	11,009,097
Premium (Including Premium and Deductible Subsidies)	7,191,595	7,241,494	7,251,870	7,318,266	7,361,862	7,392,903	7,947,550	-	-	-	-	-	51,705,540
Less Cost	5,718,968	7,575,131	7,540,468		11,140,357	7,866,635	9,919,193	-	-	-	-	-	58,005,147
Less Unfunded Policyholder Subsidies Monthly Change	1,472,627	(333,637)	(288,598)	2,151,879 (3,078,008)	- (2 770 40E)	(473,732)	(1,971,643)				-		2,151,879 (8,451,486)
Worlding Change	1,472,027	(333,037)	(200,390)	(3,070,000)	(3,770,493)	(473,732)	(1,971,043)	-	-	-	-	-	(0,431,400)
Ending Surplus / (Deficit)	13,332,224	12,998,587	12,709,989	9,631,981	5,853,486	5,379,754	3,408,111	-	-	-	-	-	3,408,111
Assigned Surplus to SFY 2004	46.956	37.564	28.172	18.786	9,386	_	_	_	_	_	_	_	-
Unassigned Surplus	13,285,268	12,961,023	12,681,817	9,613,195	5,844,100	5,379,754	3,408,111	-	-	-	-	-	3,408,111
Providers													
Prior Period Surplus / (Deficit)	1.093.317	1.398.585	2.659.264	3.642.010	4.590.673	6.227.371	7,184,952	_	_	_	-	_	1,093,317
, ,	,,-	, ,	, ,	-,-	,,-								
Contribution	2,436,326	3,990,827	3,672,999	3,897,484	5,552,906	3,786,128	4,513,059	-	-	-	-	-	27,849,729
Less Cost Premium Subsidy Underpayment Adj.	2,131,058	2,730,148	2,690,253	2,948,821	3,916,208	2,828,547	3,510,224	-	_	-	-	-	20,755,259
Monthly Change	305,268	1,260,679	982,746	948,663	1,636,698	957,581	1,002,835	-	-	-	-	-	7,094,470
Ending Surplus / (Deficit)	1,398,585	2,659,264	3,642,010	4,590,673	6,227,371	7,184,952	8,187,787	-	-	-	-	-	8,187,787
Insurers													
Prior Period Surplus / (Deficit)	2,770,012	3,869,895	4,370,689	4,911,378	5,166,759	4,481,493	4,883,888	-	-	-	-	-	2,770,012
Assessment	3.230.941	3.230.941	3.230.941	3.204.202	3.230.941	3.230.941	2.691.362						22.050.269
Less Cost	2,131,058	2,730,147	2,690,252	2,948,821	3,916,207	2,828,546	3,510,224		_	-	-		22,050,269
Premium Subsidy Underpayment Adj.			-	· · · · -	· · · · -	-	· · · -	-	-	-	-	-	
Monthly Change	1,099,883	500,794	540,689	255,381	(685,266)	402,395	(818,862)	-	-	-	-	-	1,295,014
Ending Surplus / (Deficit)	3.869.895	4.370.689	4.911.378	5.166.759	4.481.493	4.883.888	4.065.026	_	_	_	_	_	4,065,026
3,		, , , , , , ,	1 1	.,,	1 1 1	,,	,,.						11
Unfunded Deductible and Coinsurance Subsidy													
Prior Period Surplus / (Deficit)	(1,936,562)	(2,010,451)	(2,079,950)	_	(82,561)	(150,564)	(223,692)		_		_		215,317
Monthly Change	(73,889)	(69,499)	(71,929)	(82,561)	(68,003)	(73,128)	(75,165)	-	_	-	-	-	(514,174)
Ending Surplus / (Deficit)	(2,010,451)	(2,079,950)	(2,151,879)	(82,561)	(150,564)	(223,692)	(298,857)	-	-	-	-	-	(298,857)
Total HIRSP Retained Earnings	16,590,253	17,948,590	19,111,498	19,306,852	16,411,786	17,224,902	15,362,067	-	-	-	-	-	15,362,067

### Wisconsin Health Insurance Risk Sharing Plan July 31, 2004 Calendar Year 2004

### **Unaudited Balance Sheet**

Assets	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Cash and Cash Equivalents	40,798,764	44,736,354	50,867,643	50,355,425	42,778,753	50,563,375	44,175,497	-	-	-	-	-
Other Receivables (2)	440,887	478,803	391,542	419,460	219,745	189,920	39,541	-	-	-	-	-
Drug Rebates Receivable	532,476	608,656	789,956	874,099	805,475	941,241	694,465	-	-	-	-	-
Assessments Receivable	3,233,477	415,828	150,150	132,574	110,295	90,547	2,781,901	-	-	-	-	-
Prepaid Items	52,035	71,517	52,848	70,020	45,579	27,614	57,739	-	-	-	-	-
Total Assets	45,057,639	46,311,158	52,252,139	51,851,578	43,959,847	51,812,697	47,749,143	-	-	-	=	-
Liabilities and Fund Equity												
Liabilities:												
Unpaid Medical loss Liabilities	13,706,091	13,359,225	13,300,096	12,445,427	15,395,789	15,294,266	16,129,059	-	-	-	-	-
Unpaid Prescription Drug Loss Liabilities	1,712,604	1,948,843	769,128	1,087,953	1,555,753	1,644,708	2,198,353	-	-	-	-	-
Unpaid Loss Adjustment Expense	660,000	660,000	660,000	660,000	660,000	660,000	660,000	-	-	-	-	-
Unearned Premiums	11,026,649	5,952,858	14,918,164	11,162,256	6,043,829	16,566,388	12,626,044	-	-	-	-	-
Unearned Assessments	495,774	5,665,239	2,717,945	6,436,773	3,219,789	-	-	-	-	-	-	-
Accounts Payable and Other Accrued Liabilities	866,268	776,403	775,308	752,317	672,901	422,433	773,620	-	-	-	-	
Total Liabilities	28,467,386	28,362,568	33,140,641	32,544,726	27,548,061	34,587,795	32,387,076	-	-	-	-	-
Fund Equity:												
	13,332,224	12,998,587	12,709,989	9,631,981	5,853,486	5,379,754	3,408,111					
Policyholder Providers	1.398.585	2,659,264	3.642.010	4,590,673	6,227,371	7,184,952	8,187,787	-	-	-	-	-
Insurers	3,869,895	4,370,689	4,911,378	5,166,759	4,481,493	4,883,888	4,065,026	-	-	-	-	-
Unfunded Deductible and Coinsurance Subsidy	(2,010,451)	(2,079,950)	(2,151,879)	(82,561)	(150,564)	(223,692)	(298,857)	-	-	-	-	-
Total Retained Earnings	16,590,253	17,948,590	19,111,498	19,306,852	16,411,786	17,224,902	15,362,067			<u> </u>		<del></del>
Total Netaineu Larinings	10,330,233	17,340,330	13,111,430	13,300,032	10,411,700	11,224,902	13,302,007	-	-	-	-	-
Total Liabilities and Fund Equity	45,057,639	46,311,158	52,252,139	51,851,578	43,959,847	51,812,697	47,749,143	-	-	_	-	_
- <del>-</del>												

### **EARNED PREMIUM**

## **FISCAL YEAR 2005**

EAI	RNED PREMIUM
MONTH	FY 05
JUL	7,539,898
AUG	
SEP	
OCT	
NOV	
DEC	
JAN	
FEB	
MAR	
APR	
MAY	
JUN	
TOTAL	\$7,539,898

### Wisconsin Health Insurance Risk Sharing Plan Assessment Status

		sessment		1st Inst			2nd Inst	
		1 - 12/31/04	_	Due 9		-	Due 1	_
Period	Payments	A/R		Payments	A/R		Payments	A/R
Ending	Received	Balance	<u> </u>	Received	Balance		Received	Balance
07/10/04	-	16,148,173.17		-	8,074,086.59			8,074,086.58
07/17/04	-	16,148,173.17		<del>-</del>	8,074,086.59			8,074,086.58
07/24/04	-	16,148,173.17		35,842.61	8,038,243.98		35,842.64	8,038,243.94
07/31/04	-	16,148,173.17		330,509.13	7,707,734.85		215,696.51	7,822,547.43
Jul Total	-		\$	366,351.74		\$	251,539.15	
Aug Total	\$ -		\$	-		\$	-	
Sep Total	\$ -		\$	-		\$	-	
Oct Total	\$ -		\$	-		\$	-	
Nov Total	\$ -		\$			\$		
NOV TOTAL		<u> </u>	Φ.	-	I 	•	-	
Dec Total	\$ -		\$	-		\$	-	
Grand Total	\$ -	\$ 16,148,173.17	\$	366,351.74	\$ 7,707,734.85	\$	251,539.15	\$ 7,822,547.43

### Monthly Applicant Activity July Month End, 2004

		Plan 1A	Plan 1B	Plan 2	Total
Number of Applications Pending June Month End*, 2004		389	294	24	707
Number of Applications Received in July, 2004		255	292	16	563
Number of Applications Rejected in July, 2004		28	10	1	39
Number of Applications Closed in July, 2004		28	31	3	62
Number of Applications Pending July End*, 2004	**	376	284	29	689
Number of Applications Approved in July, 2004		212	261	7	480

 $<sup>^{\</sup>star}$  The above numbers are based on Month End which is the last Friday in the Month. July data includes 6-26-04 to 7-30-04.

<sup>\*\*</sup>Pending applications include applications received and not processed and applications pending for more information.

Plan 1A	Plan 1B	Plan 2	Total
18	5	0	23
2	1	0	3
4	3	1	8
2	0	0	2
2	1	0	3
28	10	1	39
12	11	1	24
red 10	18	1	29
ved 6	2	1	9
28	31	3	62
	18 2 4 2 2 2 28 28 red 10 red 6	18 5 2 1 4 3 2 0 2 1 28 10  12 11 28 10  14 10 18 28 10	18 5 0 2 1 0 4 3 1 2 0 0 2 1 0 2 1 0 28 10 1 28 10 1

## Applicant Eligibility Determination July 2004

A.	Medicare Eligible	7
B.	HIV +	3
C.	Eligible Individual	212
D.	Letter of Medical Eligibility	258
	1. Notice of Rejection by:	
	Blue Cross & Blue Shield United of Wisconsin Wisconsin Physicians Service Insurance Humana Insurance Company Fortis Benefits Insurance Golden Rule Insurance Company Mega Life and Health Insurance American Family American Medical Security Group American Republic Physicians Plus Insurance Security Health Plan Midwest National Life Insurance Pekin Life Insurance Unity Health Plan American National Life Insurance Company Empire Fire and Marine John Alden Life Insurance Midwest Security Life Insurance Atrium Health Plan Celtic Life Insurance Company United Wisconsin Insurance Valley Health Plan West Coast Life Insurance Company World Insurance	53 37 35 25 18 16 13 11 7 6 6 5 4 4 2 2 2 2 1 1 1 1 1
	3. Notice of Premium increase due to a Health Reason	0
Total		480

### **RESTATED POLICIES IN FORCE - AS OF JULY 2004 MONTH END**

	Total Subsidy		Total Non-Subsidy			Combined Total*					
	Plan 1A	Plan 2	Total	Plan 1A	Plan 1B	Plan 2	Total	Plan 1A	Plan 1B	Plan 2	Total
August, 2003	3,114	804	3,918	5,376	6,952	927	13,255	8,490	6,952	1,731	17,173
September, 2003	3,153	813	3,966	5,379	7,115	923	13,417	8,532	7,115	1,736	17,383
October, 2003	3,188	815	4,003	5,265	7,220	918	13,403	8,453	7,220	1,733	17,406
November, 2003	3,201	813	4,014	5,275	7,338	920	13,533	8,476	7,338	1,733	17,547
December, 2003	3,200	810	4,010	5,319	7,412	930	13,661	8,519	7,412	1,740	17,671
January, 2004	3,145	808	3,953	4,962	7,914	929	13,805	8,107	7,914	1,737	17,758
February, 2004	3,158	805	3,963	5,029	8,011	938	13,978	8,187	8,011	1,743	17,941
March, 2004	3,174	796	3,970	5,072	8,134	947	14,153	8,246	8,134	1,743	18,123
April, 2004	3,175	790	3,965	5,106	8,168	955	14,229	8,281	8,168	1,745	18,194
May, 2004	3,192	795	3,987	5,152	8,323	955	14,430	8,344	8,323	1,750	18,417
June, 2004	3,179	798	3,977	5,172	8,369	963	14,504	8,351	8,369	1,761	18,481
July, 2004	2,864	721	3,585	5,468	8,398	1,036	14,902	8,332	8,398	1,757	18,487

## **Detail of Total Subsidy Policies in Force**

	Level 0	Level 1	Level 2	Level 3	Level 4	Level 5	Total
August, 2003	13,255	547	583	732	1,448	608	17,173
September, 2003	13,417	550	594	743	1,474	605	17,383
October, 2003	13,403	555	603	743	1,500	602	17,406
November, 2003	13,533	558	600	749	1,507	600	17,547
December, 2003	13,661	554	598	742	1,511	605	17,671
January, 2004	13,805	523	589	738	1,544	559	17,758
February, 2004	13,978	525	590	740	1,548	560	17,941
March, 2004	14,153	526	595	739	1,549	561	18,123
April, 2004	14,229	530	601	734	1,542	558	18,194
May, 2004	14,430	522	602	738	1,558	567	18,417
June, 2004	14,504	523	596	740	1,555	563	18,481
July, 2004	14,902	551	531	644	1,294	565	18,487

<sup>\*</sup>Level 0 = Income > \$25,000

<sup>\*</sup>Level 1 = Income \$17,000 - \$19,999

<sup>\*</sup>Level 2 = Income \$14,000 - \$16,999

<sup>\*</sup>Level 3 = Income \$10,000 - \$13,999

<sup>\*</sup>Level 4 = Income <=\$9,999

<sup>\*</sup>Level 5 = Income \$20,000 - \$24,999

# Total Policies in Force by Plan, Gender, & Age Group as of July 31, 2004

## Male

Plan	Gender	Age Group	# Policy holders
1A	Male	0 - 24	447
1A	Male	25 - 29	200
1A	Male	30 - 34	196
1A	Male	35 - 39	271
1A	Male	40 - 44	429
1A	Male	45 - 49	512
1A	Male	50 - 54	561
1A	Male	55 - 59	502
1A	Male	60 - 64	523
1A	Male	65+	5
		Total:	3,646

Plan	Gender	Age Group	# Policy holders
1B	Male	0 - 24	239
1B	Male	25 - 29	36
1B	Male	30 - 34	73
1B	Male	35 - 39	131
1B	Male	40 - 44	270
1B	Male	45 - 49	401
1B	Male	50 - 54	594
1B	Male	55 - 59	780
1B	Male	60 - 64	1,257
1B	Male	65+	3
	,	Total:	3,784

Plan	Gender	Age Group	# Policy holders
2	Male	0 - 24	2
2	Male	25 - 29	13
2	Male	30 - 34	16
2	Male	35 - 39	37
2	Male	40 - 44	79
2	Male	45 - 49	122
2	Male	50 - 54	126
2	Male	55 - 59	111
2	Male	60 - 64	101
2	Male	65+	128
		Total:	735

Plan	Gender	Age Group	# Policy holders
1A	Female	0 - 18	172
1A	Female	19 - 24	234
1A	Female	25 - 29	212
1A	Female	30 - 34	208
1A	Female	35 - 39	258
1A	Female	40 - 44	339
1A	Female	45 - 49	511
1A	Female	50 - 54	659
1A	Female	55 - 59	867
1A	Female	60 - 64	1,210
1A	Female 65+		16
		Total:	4,686

Plan	Gender	Age Group	# Policy holders
1B	Female	0 - 18	84
1B	Female	19 - 24	57
1B	Female	25 - 29	42
1B	Female	30 - 34	73
1B	Female	35 - 39	134
1B	Female	40 - 44	268
1B	Female	45 - 49	442
1B	Female	50 - 54	645
1B	Female	55 - 59	1,057
1B	Female	60 - 64	1,802
1B	Female	65+	10
		Total:	4,614

Plan	Gender	Age Group	# Policy holders
2	Female	19 - 24	3
2	Female	25 - 29	6
2	Female	30 - 34	15
2	Female	35 - 39	27
2	Female	40 - 44	66
2	Female	45 - 49	102
2	Female	50 - 54	140
2	Female	55 - 59	147
2	Female	60 - 64	199
2	Female	65+	317
		Total:	1,022

# Total Policies in Force by Plan, Gender, Zone & Age Group as of July 31, 2004

### Male

Plan	Zone	Gender	Age Group	# Policy holders
1A	1	Male	0 - 24	30
1A	1	Male	25 - 29	20
1A	1	Male	30 - 34	22
1A	1	Male	35 - 39	35
1A	1	Male	40 - 44	38
1A	1	Male	45 - 49	48
1A	1	Male	50 - 54	39
1A	1	Male	55 - 59	43
1A	1	Male	60 - 64	35
			Total:	310

Plan	Zone	Gender	Age Group	# Policy holders
1A	2	Male	0 - 24	140
1A	2	Male	25 - 29	64
1A	2	Male	30 - 34	69
1A	2	Male	35 - 39	78
1A	2	Male	40 - 44	126
1A	2	Male	45 - 49	137
1A	2	Male	50 - 54	165
1A	2	Male	55 - 59	134
1A	2	Male	60 - 64	133
1A	2	Male	65+	3
			Total:	1,049

Plan	Zone	Gender	Age Group	# Policy holders
1A	3	Male	0 - 24	277
1A	3	Male	25 - 29	116
1A	3	Male	30 - 34	105
1A	3	Male	35 - 39	158
1A	3	Male	40 - 44	265
1A	3	Male	45 - 49	327
1A	3	Male	50 - 54	357
1A	3	Male	55 - 59	325
1A	3	Male	60 - 64	355
1A	3	Male	65+	2
			Total:	2,287

Plan	Zone	Gender	Age Group	# Policy holders
1A	1	Female	0 - 18	8
1A	1	Female	19 - 24	17
1A	1	Female	25 - 29	31
1A	1	Female	30 - 34	22
1A	1	Female	35 - 39	14
1A	1	Female	40 - 44	23
1A	1	Female	45 - 49	42
1A	1	Female	50 - 54	68
1A	1	Female	55 - 59	80
1A	1	Female	60 - 64	88
1A	1	Female	65+	1
			Total:	394

Plan	Zone	Gender	Age Group	# Policy holders
1A	2	Female	0 - 18	49
1A	2	Female	19 - 24	66
1A	2	Female	25 - 29	65
1A	2	Female	30 - 34	73
1A	2	Female	35 - 39	96
1A	2	Female	40 - 44	110
1A	2	Female	45 - 49	150
1A	2	Female	50 - 54	163
1A	2	Female	55 - 59	246
1A	2	Female	60 - 64	346
1A	2	Female	65+	6
		-	Total:	1,370

Plan	Zone	Gender	Age Group	# Policy holders
1A	3	Female	0 - 18	115
1A	3	Female	19 - 24	151
1A	3	Female	25 - 29	116
1A	3	Female	30 - 34	113
1A	3	Female	35 - 39	148
1A	3	Female	40 - 44	206
1A	3	Female	45 - 49	319
1A	3	Female	50 - 54	428
1A	3	Female	55 - 59	541
1A	3	Female	60 - 64	776
1A	3	Female	65+	9
			Total:	2,922

# Total Policies in Force by Plan, Gender, Zone & Age Group as of July 31, 2004

### Male

Plan	Zone	Gender	Age Group	# Policy holders
1B	1	Male	0 - 24	15
1B	1	Male	25 - 29	4
1B	1	Male	30 - 34	5
1B	1	Male	35 - 39	23
1B	1	Male	40 - 44	26
1B	1	Male	45 - 49	25
1B	1	Male	50 - 54	43
1B	1	Male	55 - 59	48
1B	1	Male	60 - 64	72
			Total:	261

Plan	Zone	Gender	Age Group	# Policy holders
1B	1	Female	0 - 18	7
1B	1	Female	19 - 24	4
1B	1	Female	25 - 29	5
1B	1	Female	30 - 34	11
1B	1	Female	35 - 39	8
1B	1	Female	40 - 44	15
1B	1	Female	45 - 49	28
1B	1	Female	50 - 54	38
1B	1	Female	55 - 59	63
1B	1	Female	60 - 64	115
			Total:	294

Plan	Zone	Gender	Age Group	# Policy holders
1B	2	Male	0 - 24	80
1B	2	Male	25 - 29	6
1B	2	Male	30 - 34	25
1B	2	Male	35 - 39	29
1B	2	Male	40 - 44	89
1B	2	Male	45 - 49	103
1B	2	Male	50 - 54	180
1B	2	Male	55 - 59	206
1B	2	Male	60 - 64	346
1B	2	Male	65+	1
			Total:	1,065

Plan	Zone	Gender	Age Group	# Policy holders
1B	2	Female	0 - 18	32
1B	2	Female	19 - 24	17
1B	2	Female	25 - 29	11
1B	2	Female	30 - 34	25
1B	2	Female	35 - 39	49
1B	2	Female	40 - 44	77
1B	2	Female	45 - 49	144
1B	2	Female	50 - 54	197
1B	2	Female	55 - 59	308
1B	2	Female	60 - 64	515
1B	2	Female	65+	5
			Total:	1,380

Plan	Zone	Gender	Age Group	# Policy holders
1B	3	Male	0 - 24	144
1B	3	Male	25 - 29	26
1B	3	Male	30 - 34	43
1B	3	Male	35 - 39	79
1B	3	Male	40 - 44	155
1B	3	Male	45 - 49	273
1B	3	Male	50 - 54	371
1B	3	Male	55 - 59	526
1B	3	Male	60 - 64	839
1B	3	Male	65+	2
			Total:	2,458

Plan	Zone	Gender	Age Group	# Policy holders
1B	3	Female	0 - 18	45
1B	3	Female	19 - 24	36
1B	3	Female	25 - 29	26
1B	3	Female	30 - 34	37
1B	3	Female	35 - 39	77
1B	3	Female	40 - 44	176
1B	3	Female	45 - 49	270
1B	3	Female	50 - 54	410
1B	3	Female	55 - 59	686
1B	3	Female	60 - 64	1,172
1B	3	Female	65+	5
			Total:	2.940

# Total Policies in Force by Plan, Gender, Zone & Age Group as of July 31, 2004

## Male

Plan	Zone	Gender	Age Group	# Policy holders
2	1	Male	0 - 24	1
2	1	Male	25 - 29	2
2	1	Male	30 - 34	5
2	1	Male	35 - 39	10
2	1	Male	40 - 44	14
2	1	Male	45 - 49	23
2	1	Male	50 - 54	20
2	1	Male	55 - 59	15
2	1	Male	60 - 64	11
2	1	Male	65+	5
			Total:	106

Plan	Zone	Gender	Age Group	# Policy holders
2	1	Female	19 - 24	1
2	1	Female	25 - 29	1
2	1	Female	30 - 34	2
2	1	Female	35 - 39	2
2	1	Female	40 - 44	10
2	1	Female	45 - 49	14
2	1	Female	50 - 54	15
2	1	Female	55 - 59	13
2	1	Female	60 - 64	13
2	1	Female	65+	27
			Total:	98

Plan	Zone	Gender	Age Group	# Policy holders
2	2	Male	25 - 29	1
2	2	Male	30 - 34	6
2	2	Male	35 - 39	10
2	2	Male	40 - 44	22
2	2	Male	45 - 49	31
2	2	Male	50 - 54	40
2	2	Male	55 - 59	30
2	2	Male	60 - 64	35
2	2	Male	65+	39
			Total:	214

Plan	Zone	Gender	Age Group	# Policy holders
2	2	Female	25 - 29	2
2	2	Female	30 - 34	6
2	2	Female	35 - 39	13
2	2	Female	40 - 44	25
2	2	Female	45 - 49	30
2	2	Female	50 - 54	41
2	2	Female	55 - 59	44
2	2	Female	60 - 64	54
2	2	Female	65+	89
			Total:	304

Plan	Zone	Gender	Age Group	# Policy holders
2	3	Male	0 - 24	1
2	3	Male	25 - 29	10
2	3	Male	30 - 34	5
2	3	Male	35 - 39	17
2	3	Male	40 - 44	43
2	3	Male	45 - 49	68
2	3	Male	50 - 54	66
2	3	Male	55 - 59	66
2	3	Male	60 - 64	55
2	3	Male	65+	84
			Total:	415

Plan	Zone	Gender	Age Group	# Policy holders
2	3	Female	19 - 24	2
2	3	Female	25 - 29	3
2	3	Female	30 - 34	7
2	3	Female	35 - 39	12
2	3	Female	40 - 44	31
2	3	Female	45 - 49	58
2	3	Female	50 - 54	84
2	3	Female	55 - 59	90
2	3	Female	60 - 64	132
2	3	Female	65+	201
			Total:	620

## Total Subsidy/Non-Subsidy Restated for July 31, 2004

Plan		# Policyholders
1A	Non-Subsidized	5,468
1A	Subsidized	2,864
1B	Non-Subsidized	8,398
2	Non-Subsidized	1,036
2	Subsidized	721
	Total	: 18,487

## Total Subsidy by Level Restated for July 31, 2004

Subsidy Level	# Policyholders
Level 0	14,902
Level 1	551
Level 2	531
Level 3	644
Level 4	1,294
Level 5	565
Total:	18,487

## Total Policies in Force by Zone, Plan and Subsidy Restated for July 31, 2004

	# Policyholders
Plan 1A, Zone 1, Non-Subsidized	409
Plan 1A, Zone 1, Subsidized	295
Plan 1A, Zone 2, Non-Subsidized	1,652
Plan 1A, Zone 2, Subsidized	767
Plan 1A, Zone 3, Non-Subsidized	3,407
Plan 1A, Zone 3, Subsidized	1,802
Plan 1B, Zone 1, Non-Subsidized	555
Plan 1B, Zone 2, Non-Subsidized	2,445
Plan 1B, Zone 3, Non-Subsidized	5,398
Plan 2, Zone 1, Non-Subsidized	104
Plan 2, Zone 1, Subsidized	100
Plan 2, Zone 2, Non-Subsidized	317
Plan 2, Zone 2, Subsidized	201
Plan 2, Zone 3, Non-Subsidized	615
Plan 2, Zone 3, Subsidized	420
То	otal: 18,487

Customer Service Monthly Operating Report July, 2004

Jul-04	Calls	Calls	#	%	Average	Shortest	Longest	Average
Week Ending	Offered	Handled	Abandoned	Abandoned	Wait	Wait	Wait	Talk
2-Jul	2,509	2,356	153	6.1%	3.56	0.00	8.57	2.87
9-Jul	1,957	1,909	48	2.5%	2.80	0.00	6.46	2.77
16-Jul	2,575	2,371	204	7.9%	3.24	0.00	8.11	3.24
23-Jul	2,252	2,137	115	5.1%	2.32	0.00	5.51	3.08
30-Jul	2,160	2,092	68	3.1%	2.05	0.00	4.42	2.45
Total	11,453	10,865	588	4.9%	2.79	0.00	8.57	2.88

Historical	Calls	Calls	#	%	Average	Shortest	Longest	Average
2003/2004 Stats	Offered	Handled	Abandoned	Abandoned	Wait	Wait	Wait	Talk
Jul-03	9,421	8,260	1,161	12.3%	4.49	0.00	12.31	2.46
Aug-03	11,590	10,859	731	6.3%	2.81	0.00	9.69	2.54
Sep-03	10,203	8,894	1,309	12.8%	4.80	0.00	10.87	2.61
Oct-03	13,226	11,261	1,965	14.9%	5.39	0.00	18.38	2.62
Nov-03	8,836	7,280	1,556	17.6%	6.59	0.00	20.02	3.16
Dec-03	9,053	7,741	1,312	14.5%	5.78	0.00	15.11	3.56
Jan-04	11,781	10,401	1,380	11.7%	5.12	0.00	13.30	3.40
Feb-04	10,435	9,338	1,097	10.5%	4.43	0.00	14.29	3.22
Mar-04	11,213	9,694	1,519	13.5%	5.03	0.00	13.07	3.10
Apr-04	13,716	12,529	1,187	8.7%	3.56	0.00	11.07	2.87
May-04	9,600	8,908	692	7.2%	2.97	0.00	11.37	3.19
Jun-04	10,572	9,360	1,212	11.5%	4.60	0.00	12.18	3.34
Jul-04	11,453	10,865	588	4.9%	2.79	0.00	8.57	2.88

Most Commonly Asked Questions to Customer Service - July 2004

- 1. What is my claim status?
- 2. Did you receive my subsidy application for premiums?
- 3. I do not understand my premium.

	Written Correspondence - July 2004												
	Beginning Inventory	Received	Completed		Inventory	Ending Inventory							
				< 10 days	10-30 days	> 30 days							
Customer Srvc	3	186	189	0	0	0	0						
Enrollment	0	335	335	0	0	0	0						
Underwriting	22	56	60	12	6	0	18						

#### **CLAIMS PROCESSED**

Claims that have finalized to payment or denial during the month

Claim type/Description	Jan-03	Feb-03	Mar-03	Apr-03	May-03	Jun-03	Jul-03	Aug-03	Sep-03	Oct-03	Nov-03	Dec-03	YTD Total
CT10 Pharmacy (Non-PBM)**	5	15	0	1	34	1	10	2	2	1	0	0	71
CT10 Pharmacy (PBM)***	224	54	131	218	3	50	11	53	31	0	0	0	775
WP Wellpoint Pharmacy ****	49,812	51,356	52,987	52,057	80,707 (1)	54,288	55,136	55,060	56,913	87,190 <sup>(1)</sup>	59,373	61,341	716,220
CT19 Pharmacy Adjustments (Non-PBM)**	3	4	6	2	0	0	0	0	0	0	0	0	15
CT19 Pharmacy Adj. (PBM) ***	0	0	0	0	0	0	0	0	0	0	0	0	0
WP Wellpoint Reversals *****	-2,332	-2,444	-2,447	-2,337	-3,638	-2,489	-2,415	-2,537	-2,566	-4,026	-2,846	-2,869	-32,946
CT20 Physicians	23,478	21,121	20,379	18,370	24,588	19,996	19,487	24,257	18,355	24,187	26,047	23,229	263,494
CT23 Outpatient Hospital	3,958	3,702	3,430	3,406	4,309	3,757	3,499	4,356	3,438	3,992	4,537	4,774	47,158
CT24 Miscellaneous	1,833	1,605	1,591	1,290	1,631	1,492	1,594	1,654	1,621	1,907	1,834	2,222	20,274
CT30 Professional Crossovers	4,625	4,102	4,098	3,282	4,371	3,639	3,605	4,351	3,479	3,996	4,394	3,544	47,486
CT31 Outpatient Crossovers	931	800	837	766	891	825	727	936	819	1,128	1,034	1,236	10,930
CT39 Professional Adjustments	178	250	512	277	431	216	509	452	331	200	181	237	3,774
CT40 Inpatient Hospital	391	354	286	290	384	342	304	348	244	384	376	408	4,111
CT41 Nursing Home	38	22	44	15	26	30	25	18	20	38	25	19	320
CT49 Inpatient Hospital Adjustments	7	9	8	15	11	16	31	23	18	36	7	8	189
CT50 Inpatient Hospital Crossovers	85	90	77	49	92	72	61	102	69	63	73	65	898
CT51 Nursing Home Crossovers	10	5	15	12	25	12	21	20	12	8	3	9	152
CT59 Nursing Home Adjustments	0	0	0	2	0	1	0	0	0	0	0	0	3
Total claims processed*	83,246	81,045	81,954	77,715	113,865	82,248	82,605	89,095	82,786	119,104	95,038	94,223	1,082,924

Clair	n type/Description	Jan-04	Feb-04	Mar-04	Apr-04	May-04	Jun-04	Jul-04	Aug-04	Sep-04	Oct-04	Nov-04	Dec-04	YTD Total
CT10	Pharmacy (Non-PBM)**	0	0	0	0	0	0	0						0
CT10	Pharmacy (PBM)***	0	0	0	0	0	0	0						0
WP	Wellpoint Pharmacy ****	58,899	59,759	91,483 <sup>(1)</sup>	62,203	65,556	62,837	63,948						464,685
CT19	Pharmacy Adjustments (Non-PBM)**	0	0	0	0	0	0	0						0
CT19	Pharmacy Adj. (PBM) ***	0	0	0	0	0	0	0						0
WP	Wellpoint Reversals *****	-2,475	-2,864	-4,082	-2,709	-3,271	-2,875	-3,006						-21,282
CT20	Physicians	33,839	30,416	22,807	28,748	25,080	26,444	25,415						192,749
CT23	Outpatient Hospital	5,585	4,645	4,107	4,798	4,121	4,083	4,953						32,292
CT24	Miscellaneous	2,216	2,228	2,117	2,559	2,216	1,835	2,278						15,449
CT30	Professional Crossovers	5,805	4,941	4,116	5,534	4,072	4,465	5,037						33,970
CT31	Outpatient Crossovers	1,526	867	1,106	1,291	1,129	1,325	1,216						8,460
CT39	Professional Adjustments	469	647	1,446	960	1,298	393	618						5,831
CT40	Inpatient Hospital	598	428	458	521	423	363	457						3,248
CT41	Nursing Home	41	62	34	41	31	34	18						261
CT49	Inpatient Hospital Adjustments	6	10	20	21	16	14	17						104
CT50	Inpatient Hospital Crossovers	125	86	79	104	87	65	99						645
CT51	Nursing Home Crossovers	14	6	14	12	13	7	19						85
CT59	Nursing Home Adjustments	0	0	6	2	17	1	0						26
Total	claims processed*	106,648	101,231	123,711	104,085	100,788	98,991	101,069	0	0	0	0	0	736,523

<sup>\*</sup>The totals include paper and EMC claims. PBM claims are included in the totals starting with August 2001. In the PBM environment, each prescription processed by the PBM is counted as one claim where, previously, a claim may have included multiple prescriptions. Therefore, due to the change in pharmacy claims processing, the volume of claims processed prior to August 2001 is not comparable to the volume of claims processed in August 2001 and later.

<sup>\*\*</sup> Pharmacy non-PBM claims are for dates of service prior to August 1, 2001.

<sup>\*\*\*</sup> Pharmacy PBM claims are for dates of service between August 1, 2001 and December 31, 2001; claims were submitted through the Wellpoint system, but paid by the Fiscal Agent.

<sup>\*\*\*\*</sup> Wellpoint Pharmacy claims are processed solely through the Wellpoint system under the new co-pay guidelines and account for all prescriptions filled beginning January 1, 2002.

<sup>\*\*\*\*\*</sup>Wellpoint reversals will always negate a Wellpoint pharmacy claim beginning January 1, 2002.

<sup>(1)</sup> Increase in claims count is due to an additional pay period. This month includes 3 pay periods.

### **AVERAGE CLAIMS PROCESSING DAYS**

Claim type/Description*	Jul-03	Aug-03	Sep-03 *	** Oct-03	Nov-03	Dec-03	Jan-04	Feb-04	Mar-04	Apr-04	May-04	Jun-04	Jul-04
CT10 Pharmacy	154	511	632	2	0	0	0	0	0	0	0	0	0
CT19 Pharmacy Adjustments	0	0	0	0	0	0	0	0	0	0	0	0	0
CT20 Physicians	14	14	13	15	15	17	16	13	13	13	15	11	12
CT23 Outpatient Hospital	12	14	12	15	13	14	13	13	11	11	13	11	10
CT24 Miscellaneous	15	19	15	18	15	16	18	16	13	14	15	13	14
CT30 Professional Crossovers	10	11	11	13	13	15	15	11	11	12	11	10	11
CT31 Outpatient Crossovers	16	17	15	18	16	18	17	18	17	16	19	15	13
CT39 Professional Adjustments	12	11	13	22	37	44	43	34	19	23	29	21	15
CT40 Inpatient Hospital	20	16	15	20	16	17	20	17	15	18	17	16	15
CT41 Nursing Home	15	13	17	18	16	14	18	15	10	12	11	16	10
CT49 Inpatient Hospital Adjustments	17	12	15	17	37	48	44	30	24	21	19	14	10
CT50 Inpatient Hospital Crossovers	10	11	10	13	10	12	12	13	13	12	14	11	9
CT51 Nursing Home Crossovers	10	16	12	21	20	12	21	11	10	10	6	11	9
CT59 Nursing Home Adjustments	0	0	0	0	0	0	0	0	19	76	16	24	0
Average for the Month	13	14	13 *	** 16	13	**** 16	**** 16	14	13	14	***** 16	12	12

<sup>\*</sup>A "0" days to process indicates there were no claims submitted for that claim type in that month.

 $\label{thm:wellpoint} \mbox{Wellpoint pharmacy claims processed solely through the Wellpoint system are not included in}$ 

this report for prescriptions filled beginning January 1, 2002.

<sup>\*\*</sup> No Wellpoint paper claims were paid in May and October. This number includes only non-PBM claims.

<sup>\*\*\*</sup>Processing of claims received October 1, 2003 and after did not begin until October 13, 2003 due to HIPAA changes, making the average processing days higher than normal.

<sup>\*\*\*\*</sup>HIPAA changes and a high volume of claims submitted made the average processing days higher than normal

<sup>\*\*\*\*\*</sup> Higher than normal claim average resulting from a clean up of aged medical review claims

## WISCONSIN HEALTH INSURANCE RISK SHARING PLAN HIRSP MONTH END CLAIMS INVENTORY

Claim Type/ Description	Number of clai	ms to be keyed	Claims in the system being processed (includes claims waiting to be keyed)		
	Total	Over 30 days old	Total	Over 30 days old	
July 2003 - All Claim Types	710	0	4,670	1,264	
August 2003 - All Claim Types	2,324	0	5,614	870	
September 2003 - All Claim Types	2,638	0	6,613	1,094	
October 2003 - All Claim Types	6,321	0	10,134	1,554	
November 2003 - All Claim Types	5,195	0	9,044	1,229	
December 2003 - All Claim Types	11,177	0	14,939	1,508	
January 2004 - All Claim Types	9,242	0	13,832	1,837	
February 2004 - All Claim Types	3,163	0	8,050	2,046	
March 2004 - All Claim Types	3,502	0	8,156	1,910	
April 2004 - All Claim Types	4,429	0	9,582	2,378	
May 2004 - All Claim Types	5,387	0	9,401	1,427	
June 2004 - All Claim Types	355	0	4,886	1,435	
July 2004 - All Claim Types	4,580	0	8,099	1,198	

### June 2004

Claim Type / Description		Number of claims to be keyed		Claims in the system being processed (includes claim waiting to be keyed)		
		Total	Over 30 days old	Total	Over 30 days old	
CT10	Pharmacy (Non-PBM)	0	0	0	0	
CT19	Pharmacy Adjustments (Non-PBM)	0	0	0	0	
CT20	Physicians	100	0	2,998	1,062	
CT23	Outpatient Hospital	92	0	609	187	
CT24	Miscellaneous	36	0	449	35	
CT30	Professional Crossovers	0	0	381	62	
CT31	Outpatient Crossovers	107	0	214	19	
CT39	Professional Adjustments	0	0	106	51	
CT40	Inpatient Hospital	8	0	111	18	
CT41	Nursing Home	0	0	1	0	
CT49	Inpatient Hospital Adjustments	0	0	1	0	
CT50	Inpatient Hospital Crossovers	11	0	14	1	
CT51	Nursing Home Crossovers	1	0	2	0	
CT59	Nursing Home Adjustments	0	0	0	0	
All Claim	Types	355	0	4,886	1,435	

### July 2004

Claim Type / Description		Number of claims to be keyed		Claims in the system being processed (includes claims waiting to be keyed)		
		Total	Over 30 days old	Total	Over 30 days old	
CT10	Pharmacy (Non-PBM)	0	0	0	0	
CT19	Pharmacy Adjustments (Non-PBM)	0	0	0	0	
CT20	Physicians	3,602	0	5,607	913	
CT23	Outpatient Hospital	135	0	818	139	
CT24	Miscellaneous	107	0	379	36	
CT30	Professional Crossovers	522	0	836	67	
CT31	Outpatient Crossovers	196	0	256	10	
CT39	Professional Adjustments	0	0	83	16	
CT40	Inpatient Hospital	11	0	99	15	
CT41	Nursing Home	2	0	6	0	
CT49	Inpatient Hospital Adjustments	0	0	0	0	
CT50	Inpatient Hospital Crossovers	3	0	13	2	
CT51	Nursing Home Crossovers	2	0	2	0	
CT59	Nursing Home Adjustments	0	0	0	0	
All Claim	Types	4,580	0	8,099	1,198	

## Claims Denied Report\* July 2004

	Plai	1 1A	Plan	1B	Pla	n 2		All	Plans	
Processing Month	Paid	Denied	Paid	Denied	Paid	Denied	Paid	Denied	Total Processed	Denial Rate
July 2003							20,441	9,422	29,863	31.6%
August 2003							25,534	10,983	36,517	30.1%
September 2003							20,675	7,731	28,406	27.2%
October 2003							15,903	20,036	35,939	*** 55.8%
November 2003							21,860	16,651	38,511	43.2%
December 2003							21,873	13,878	35,751	38.8%
January 2004							31,974	18,250	50,224	36.3%
February 2004							28,482	15,854	44,336	35.8%
March 2004	12,937	6,049	7,139	3,671	4,094	2,420	24,170	12,140	36,310	33.4%
April 2004	16,145	6,557	9,583	4,109	5,364	2,833	31,092	13,499	44,591	30.3%
May 2004	13,862	5,916	8,378	3,787	4,326	2,234	26,566	11,937	38,503	31.0%
June 2004	14,320	5,412	8,906	3,554	4,796	2,041	28,022	11,007	39,029	28.2%
July 2004	14,539	5,511	9,098	3,723	4,916	2,340	28,553	11,574	40,127	28.8%

<sup>\*</sup>Claims denied by the PBM are not included. See page 30 for claims denied by the PBM. Detailed paid versus denied claims reporting began in March 2004.

### July 2004 - Denial Reason Detail\*\*

Top F	Volume	
	_	
380	Pre-ex	3,739
187	Lack of medical necessity	2,647
401	Duplicate Claim - Professional	2,004
A22	Billing provider number invalid or incorrect	1,917
A97	Claim indicator missing or invalid	1,810
A02	Policyholder number not on file	1,572
172	Policyholder not eligible for date of service	785
152	Billing provider certification not valid for date of service	713
183	Provider type not valid for procedure billed	552
177	Invalid place of service	519
246	Procedure requires a modifier	481
171	Late Billing	465
192	Procedure requires prior authorization	405

<sup>\*\*</sup>Denial codes apply to individual service details. Claims may have more than one service detail; therefore, the number of denials shown here represents the number of denied service details, not the number of denied claims.

<sup>\*\*\*</sup>Denied claims increased due to HIPAA changes. Providers were not following HIPAA billing instructions.

<sup>\*\*\*\*</sup>The report that was used to gather the detail denial information was found to be inaccurate in the individual edit counts. The data for June 2004 was derived though a different report that has been verified to be accurate. A data correction to the detail denial data for the months of October 2003 through May 2004 will be produced. Note that the report used to gather this data was not used for any other purpose than to determine exact detail denial reasons. No other claim statistics were affected by the previously used report, including total number of claims paid and denied, nor were any operational functions affected by the old report, including claim payment.

## WISCONSIN HEALTH INSURANCE RISK SHARING PLAN PHARMACY CLAIMS DENIED BY PBM

## Claims Denied Report July 2004

Aug-03	6,981	
Sep-03	7,427	
Oct-03	11,825	
Nov-03	7,951	
Dec-03	8,271	
Jan-04	8,470	
Feb-04	8,354	
Mar-04	13,260	
Apr-04	9,383	
May-04	7,614	
Jun-04	8,148	
Jul-04	8,570	

## July 2004 - Reason Detail

* Top Reasons for Denial	Volume	
47 - Early refill	2,895	
35 - Prior Authorization required	1,798	
29 - Invalid/excessive days supply	1,058	
74 - Drug Utilization Review	641	
05 - Non-covered prescription item	640	
03 - Date filled beyond cancel / ID card expired	319	
22 - Non legend items not covered	254	
04 - Duplicate claim	235	
26 - Received beyond allowed time for filing	146	
21 - Invalid/missing National Drug Code	143	

<sup>\*</sup>In the PBM environment, each prescription processed is counted as one claim.

## Claims Accuracy Performance\* July 2004

		CLAIM	PAYMENTS	CORRECT	ACCURACY
MONTH	CLAIMS	<b>PAYMENTS</b>	REVIEWED	<b>PAYMENT</b>	RATE
Aug-03	36,572	\$4,006,464	\$119,862	\$119,862	100.00%
Sep-03	28,439	\$4,246,421	\$53,689	\$53,663	99.95%
Oct-03	35,942	\$3,517,547	\$66,842	\$70,368	**94.67%
Nov-03	38,514	\$3,779,227	\$123,352	\$122,765	99.52%
Dec-03	35,756	\$4,781,794	\$133,185	\$133,192	99.99%
Jan-04	50,224	\$5,313,619	\$60,565	\$60,379	99.69%
Feb-04	44,336	\$5,635,317	\$74,158	\$73,901	99.65%
Mar-04	35,840	\$5,549,043	\$78,006	\$78,006	100.00%
Apr-04	44,591	\$6,948,734	\$51,662	\$51,662	100.00%
May-04	38,503	\$6,050,073	\$64,896	\$64,833	99.90%
Jun-04	39,029	\$5,640,805	\$49,747	\$49,826	99.84%
Jul-04	40,127	\$7,059,137	\$80,036	\$80,036	100.00%

<sup>\*</sup> Claims processed through PBM are not included in the performance statistics.

<sup>\*\*</sup>Claim payment accuracy is lower than normal due to a keying error on one inpatient claim.

### WISCONSIN HEALTH INSURANCE RISK SHARING PLAN APPEALS AND GRIEVANCE SUMMARY July, 2004

### **CLAIM APPEALS**

TOTAL CLAIM APPEALS RECEIVED	29
REINSTATEMENTS	14
COVERAGE DENIED	1
BACK DATE SUBSIDIES	2
PA DENIAL	5
MEDICAL NECESSITY	1
PRE-X CLAIM DENIAL	3
LATE BILLING	1
OUT-OF-STATE NONCERT PROVIDER	1
OTHER	1
TOTAL CLAIMS/REINSTATEMENTS CLOSED	37
CLAIM APPEALS AVERAGE NUMBER OF DAYS	7.43
GRIEVANCES	
GRIEVANCE COMMITTEE REVIEW:	
REQUEST TO BACKDATE SUBSIDIES	2
REQUEST FOR LATE BILLING OVERRIDE	4
REQUEST FOR MEDICAL NECESSITY	3
* DEFERRED TO NEXT MONTH (AUGUST)	0